

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 701730	RECEIPT DATE:	11 / 30 / 00
IA NUMBER:	PCT/ FR99 / 01314	IA FILING DATE:	06 / 03 / 99
FAMILY NAME:	GABIN	DELAY WAIVED (Y/N):	N
GIVEN NAME:	FREDERIC	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	06 / 03 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	518-1014	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX

NAME: WILLIAM M LEE  
LEE MANN SMITH MCWILLIAMS SWEENEY & OHLSO  
STREET: PO BOX 2786

CITY: CHICAGO  
STATE/COUNTRY: IL ZIP: 606902786  
EMAIL:

APPLICATION TITLES:  
CODED PACKET TRANSMISSION WITHOUT IDENTIFYING THE CODE USED

TAB TO LAST POSITION,PUSH SEND